Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			22 (D		(Colu	(I)(1 Z)	r			OR 1 I			
			U4				ŀ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA	Ŀ	BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			LYminus 20=		* 4			X\$ 9=		OR	X\$18=	72	
INDEPENDENT CLAIMS			5 mi	nus 3 =	2	2		X42=		OR	X84=	160	
MU	LTIPLE DEPEN	IDENT CLAIM PI		··		Ī	+140=		OR	+280=			
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				L	TOTAL		OR	TOTAL	091	
CLAIMS AS AMENDED - PART II								l			OTHER		
		(Column 1)	(Column 2)			(Column 3)		SMALL E	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	L	X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		<u> </u>	ı	X42=		OR	X84=		
L	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM		t	.140			. 220		
·								+140=		OR	+280=		
							Α	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
_		(Column 1)		(Colur		(Column 3)				. ,			
AMENDMENT B		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	*	Minus	**		=	ı	X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=	t	X42=			X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							742-		OR	704=		
								+140=		OR	+280=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)											•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	H	V40			V04		
lacksquare	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM	·	L	X42=		OR	X84=		
*	If the entry in activ		+140=		OR	+280=	•						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT. FEE													
		nher Previously Pa					four	d in the enr	ronsista ha		luma 4		